# DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

	IT OF DEFICIENCIES OF CORRECTION	X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G622	(X2) MU A. BUII B. WIN	LDING	ONSTRUCTION  00	(X3) DATE COMPL 03/22	LETED
NAME OF P	ROVIDER OR SUPPLIEI				ADDRESS, CITY, STATE, ZIP CODE		
COMMUNITY ALTERNATIVES-ADEPT					LMER LN APOLIS, IN 46256		
(X4) ID	SUMMARY S	TATEMENT OF DEFICIENCIES		ID	PROVIDER'S PLAN OF CORRECTION		(X5)
PREFIX	*	ICY MUST BE PRECEDED BY FULL		PREFIX	(EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPE		COMPLETION
TAG	REGULATORY OF	LSC IDENTIFYING INFORMATION)		TAG	DEFICIENCY)		DATE
W000000							
	This wisit was Co	or a fundamental annual	11/0	00000			
			WO	00000			
	recertification ai	nd state licensure survey.					
	D	N. 1.10.20.21					
	-	: March 19, 20, 21 and					
	22, 2013.						
	Facility number						
	Provider numbe						
	AIMS number:	100245690					
	Surveyor: Kathy	J. Wanner, Medical					
	Surveyor III.						
	These federal de	eficiencies reflect state					
	findings in accor	rdance with 460 IAC 9.					
	_						
	Quality review of	completed March 26, 2013					
	_ `	n, Medical Surveyor III.					
	,,	, <del></del>					

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any defiency statement ending with an asterisk (\*) denotes a deficency which the institution may be excused from correcting providing it is determined that other safegaurds provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

# DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES X1) PROVIDER/SUPPLIER/CLIA		(X2) MULTIPLE CONSTRUCTION			(X3) DATE SURVEY		
AND PLAN	AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		A. BUILDING 00			COMPLETED	
		15G622	B. WIN	B. WING			2013
NAME OF PROVIDER OR SUPPLIER  COMMUNITY ALTERNATIVES-ADEPT				7520 KI	ADDRESS, CITY, STATE, ZIP CODE ILMER LN APOLIS, IN 46256		
(X4) ID	SUMMARY S	FATEMENT OF DEFICIENCIES		ID	PROVIDER'S PLAN OF CORRECTION		(X5)
PREFIX	(EACH DEFICIEN	CY MUST BE PRECEDED BY FULL	PREFIX		(EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIAT	re l	COMPLETION
TAG		LSC IDENTIFYING INFORMATION)		TAG	DEFICIENCY)		DATE
W000209	(if the client is a n guardian is requir is unobtainable or Based on record facility failed to the client and her the development Individual Support (ISP)/Behavior Stor 1 of 3 sample for 1 of 3 sample facility failed to his sister/Healthd (HCR) in the development at the development sister (HCR) in the development facility failed to his sister/Healthd (HCR) in the development facility failed to his sister/	ne client, his or her parent hinor), or the client's legal red unless the participation or inappropriate.  review and interview, the resure participation by a parent/legal guardian in all process of her fort Program (BSP) and clients (client #3); and and clients (client #2) the resure participation by the resure participation by the reasure participation by the resure participation by the results of the res	Wo	00209	CORRECTION:  Participation by the client, his of her parent (if the client is a minor), or the client's legal guardian is required unless the participation is unobtainable or inappropriate. Specifically, The QDDPD will assure that both of Client #3's guardian and Client #2's healthcare sister/healthcare representative receive written invitations to attend all interdisciplinary meetings and that they receive the opportunifor input toward the ongoing development and modification their Individual Support Plans as Behavior Support Pans, when they are unable to attend in person.  PREVENTION:  New professional staff are in place at the facility and will be trained regarding the need to assure complete interdisciplinate team involvement, including co-guardians and clients, in decision making. Members of to Operations and Quality  Assurance Teams will review interdisciplinary team notes as meetings occur to assure guardian representation occurs additionally, the governing bod assisting the facility with the	er e of t ture ty of and	04/21/2013

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: CZDG11

Facility ID: 001159

If continuation sheet

Page 2 of 7

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

AND PLAN OF CORRECTION IDENTIFICATION NUMBER:		(X2) MULTIPLE CO A. BUILDING B. WING	ONSTRUCTION  00	(X3) DATE SURVEY COMPLETED 03/22/2013	
	PROVIDER OR SUPPLIE		7520 K	ADDRESS, CITY, STATE, ZIP CODE ILMER LN NAPOLIS, IN 46256	
(X4) ID PREFIX TAG	(EACH DEFICIEN	STATEMENT OF DEFICIENCIES NCY MUST BE PRECEDED BY FULL R LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIA DEFICIENCY)	DATE
	Client #2's record 3/21/13 at 1:50 indicated he had dated 10/5/12. On not signed by him no evidence clie involved in the evidence indicate participation we unobtainable or An interview was Qualified Devel Professional De 3/21/13 at 4:40 client/guardian/ISP/BSP proces unable to locate An interview was Program Manage 4:36 P.M. When client/guardian/ISP/BSP proces	rd was reviewed on P.M. Client #2's record an ISP and BSP both Client #2's ISP/BSP were s HCR/sister. There was ent #2's HCR had been ISP/BSP process, or ting the HCR's buld have been inappropriate as conducted with the opmental Disabilities signee (QDDPD) on P.M. When asked about HCR participation in the s the QDDP stated, "I was them."		development of a standardize approach to ensuring guardial and client involvement in the I process.  RESPONSIBLE PARTIES: Clinical Supervisor, Residential Manager, Quality Assurance Team, Operations Team	d n DT

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: CZDG11

Facility ID: 001159

If continuation sheet

Page 3 of 7

### DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

	IT OF DEFICIENCIES OF CORRECTION	XI) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G622	(X2) MULTIPLE CO  A. BUILDING  B. WING	00	COMI	E SURVEY PLETED 2/2013
NAME OF P	ROVIDER OR SUPPLIER			ADDRESS, CITY, STATE, ZIP CO	ODE	
СОММИ	NITY ALTERNATIV	ES-ADEPT		APOLIS, IN 46256		
(X4) ID PREFIX TAG	(EACH DEFICIEN	TATEMENT OF DEFICIENCIES CY MUST BE PRECEDED BY FULL LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORR (EACH CORRECTIVE ACTION SH CROSS-REFERENCED TO THE AI DEFICIENCY)	OULD BE	(X5) COMPLETION DATE

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: CZDG11

Facility ID: 001159

If continuation sheet

Page 4 of 7

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES X1)		X1) PROVIDER/SUPPLIER/CLIA	(X2) MULTIPLE CONSTRUCTION		(X3) DATE SURVEY		
AND PLAN OF CORRECTION		IDENTIFICATION NUMBER:	A. BUILDING 00		00	COMPLETED	
		15G622				03/22/	2013
			B. WIN		ADDRESS CITY STATE ZID CODE		
NAME OF PROVIDER OR SUPPLIER					ADDRESS, CITY, STATE, ZIP CODE		
COMMUNITY ALTERNATIVES-ADEPT					LMER LN		
COMMU	NIIY ALIERNAIIV	ES-ADEPT		INDIAN	APOLIS, IN 46256		
(X4) ID	SUMMARY STATEMENT OF DEFICIENCIES		ID		PROVIDER'S PLAN OF CORRECTION		(X5)
PREFIX	(EACH DEFICIEN	CY MUST BE PRECEDED BY FULL		PREFIX	(EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIAT	ΓE	COMPLETION
TAG	REGULATORY OR	LSC IDENTIFYING INFORMATION)		TAG	DEFICIENCY)		DATE
W000262	483.440(f)(3)(i) PROGRAM MON The committee sh monitor individual manage inapprop programs that, in committee, involv and rights. Based on record facility failed to Committee revie monitored the res Support Program clients (client #1 implementation of Findings include  Client #1's record 3/21/13 at 1:01 Findicated he had Program (BSP) of BSP incorporates interventions inc psychotropic me management; Lu Risperdal (anti-p effects) and Rem One-on-one supe (physical prompt from items (food address elopeme with Velcro faste times of skin pic	ITORING & CHANGE nould review, approve, and programs designed to riate behavior and other the opinion of the e risks to client protection review and interview, the ensure the Human Rights wed, approved and strictive Behavior as for 3 of 3 sampled , #2 and #3) prior to of the programs.	Wo	00262	CORRECTION: The committees should review, approve, and monitor individual programs designed to manage inappropriate behavior and oth programs that, in the opinion of the committee, involve risks to client protection and rights. Specifically, Client #1 client #2 and Client #3's restrictive programs will be reviewed and approved consensually by the Human Rights Committee.  PREVENTION: New profession staff are in place at the facility and will be trained regarding the need to assure that the Human Rights Committee engages in dialog to reach decisions regarding restrictive programs. The agency has established a quarterly system of internal authat review all facility systems including, but not limited to, duprocess and prior written informed consent. Administration staff will conduct visits to the facility as needed but no less the monthly. RESPONSIBLE PARTIES: Clinical Supervisor, Residential Manager, Quality Assurance Team, Operations Team	ner of  nal ne n a dits le ve	04/21/2013

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: CZDG11

Facility ID: 001159

If continuation sheet Page 5 of 7

# DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

NAMI: OF PROVIDER OR SUPPLER  COMMUNITY ALTERNATIVES-ADEPT  COMMUNITY ALTERNATIVES-ADEPT  COMMUNITY ALTERNATIVES-ADEPT  SERVET ADDRESS, CITY, STATE, 7P CODE 7520 KILMER L IN INDIANAPOLIS, IN 46256  STREET ADDRESS, CITY, STATE, 7P CODE 7520 KILMER L IN INDIANAPOLIS, IN 46256  STREET ADDRESS, CITY, STATE, 7P CODE 7520 KILMER L IN INDIANAPOLIS, IN 46256  IN INDIANAPOLIS, IN 46256  COMMUNITY ALTERNATIVES-ADEPT  TAG  REGULATORY OR LSC IDENTIFYING INFORMATION)  TAG  REGULATORY OR LSC IDENTIFYING INFORMATION  Teviewed, approved or monitored by the Human Rights Committee (HRC) prior to the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management, Zyprexa (anti-spex)chotic), Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record din not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's SSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management, Seroquel (anti-spex)chotic), Xanax (anti-anxicty) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior	AND PLAN OF CORRECTION IDENTIFICATION NUMBER:				00	(X3) DATE ( COMPL		
NAME OF PROVIDER OR SUPPLIER  COMMUNITY ALTERNATIVES-ADEPT  (X4) ID SUMMARY STATEMENT OF DEFICIENCIES (BACH DEFICIENCY MUST BE PRECEDED BY PULL) RECOUNTED THE PROGRAMM OF THE PRECEDED BY PULL TAG  REGULATORY OR LOS CENTRIFYON BROFMATION)  reviewed, approved or monitored by the Human Rights Committee (HRC) prior to the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management, Zyprexa (anti-psychotic). Restitution for items client #2' breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record dindicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated his more propriated the use of restrictive interventions including the use of psychotropic medications for behavior management, Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressan). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior	11112 12111	or confidence.				<del></del>		
COMMUNITY ALTERNATIVES-ADEPT    SUMMARY STATEMENT OF DEFICIENCIES   PREFIX TAG   SUMMARY STATEMENT OF DEFICIENCIES   PREFIX TAG   PROVIDENCE SEASON OF TAG   PROVIDENCE SEASON OF TAG   PROVIDENCE SEASON OF TAG   PROVIDENCE SEASON OF TAG   PREFIX TAG				B. WIN		ADDRESS CITY STATE ZIP CODE		
ON-1D SUMMARY STATEMENT OF DEFICIENCIES PRETEX (RACH DEFICIENCY MUST HE PRECEDED BY FULL TAG REGULATORS ALS DESTIFICATION FORMATION)  TAG REGULATORS ALS DESTIFICATION FORMATION)  reviewed, approved or monitored by the Human Rights Committee (HRC) prior to the program's implementation date of \$5/31/12\$.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12.  Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic).  Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's SP2 incorporated the use of restrictive interventions including the use of psychotropic medications for behavior didicated she had a BSP dated 10/21/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12.  Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior	NAME OF P	PROVIDER OR SUPPLIER						
PREFIX TAG REGULATORY OR LSC IDENTIFYING INFORMATION)  reviewed, approved or monitored by the Human Rights Committee (HRC) prior to the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12.  Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's record management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior	COMMUNITY ALTERNATIVES-ADEPT				INDIAN	APOLIS, IN 46256		
REGULATORY OR LSC DIENTIFYING INFORMATION)  reviewed, approved or monitored by the Human Rights Committee (HRC) prior to the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Toframil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		SUMMARY STATEMENT OF DEFICIENCIES				PROVIDER'S PLAN OF CORRECTION		
reviewed, approved or monitored by the Human Rights Committee (HRC) prior to the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management, Syprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management, Scroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate he BSP had been reviewed, approved or monitored by the HRC prior		` ·				CROSS-REFERENCED TO THE APPROPRIA	TE	
Human Rights Committee (HRC) prior to the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior	TAG				TAG	DLI ICILICE I		DATE
the program's implementation date of 5/31/12.  Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
Client #2's record was reviewed on 3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior			promontation date of					
3/21/13 at 1:50 P.M. Client #2's record indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
indicated he had a BSP dated 10/5/12. Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		Client #2's recor	d was reviewed on					
Client #2's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic).  Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		3/21/13 at 1:50 F	P.M. Client #2's record					
restrictive interventions including the use of psychotropic medications for behavior management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
of psychotropic medications for behavior management; Zyprexa (anti-psychotic).  Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior			•					
management; Zyprexa (anti-psychotic). Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior			_					
Restitution for items client #2 breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
breaks/destroys, and blocking (physical prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior			1 1 7					
prompting) physically aggressive behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
behavior. Client #2's record did not indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		<u>-</u>						
indicate his BSP had been reviewed, approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		1 0,10						
approved or monitored by the HRC prior to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
to the program's implementation date of 10/5/12.  Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
Client #3's record was reviewed on 3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		10/5/12.						
3/21/13 at 2:20 P.M. Client #3's record indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
indicated she had a BSP dated 10/21/12. Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
Client #3's BSP incorporated the use of restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
restrictive interventions including the use of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
of psychotropic medications for behavior management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior			_					
management; Seroquel (anti-psychotic), Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior			_					
Xanax (anti-anxiety) and Tofranil (anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior								
(anti-depressant). Client #3's record did not indicate her BSP had been reviewed, approved or monitored by the HRC prior		_						
not indicate her BSP had been reviewed, approved or monitored by the HRC prior		,	• *					
approved or monitored by the HRC prior								
to the program's implementation date of			-					
10/21/12.		10/21/12.						

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: CZDG11

Facility ID: 001159

If continuation sheet

Page 6 of 7

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 04/17/2013 FORM APPROVED OMB NO. 0938-0391

	OF CORRECTION II	DENTIFICATION NUMBER: 15G622		LDING	00	COMPL 03/22/	ETED	
NAME OF PROVIDER OR SUPPLIER  COMMUNITY ALTERNATIVES-ADEPT			STREET ADDRESS, CITY, STATE, ZIP CODE 7520 KILMER LN INDIANAPOLIS, IN 46256					
(X4) ID PREFIX TAG	(EACH DEFICIENCY	TEMENT OF DEFICIENCIES  Y MUST BE PRECEDED BY FULL  SC IDENTIFYING INFORMATION)		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIAT DEFICIENCY)	ΓE	(X5) COMPLETION DATE	
	facility's Quality A (QAM) on 3/21/12 QAM stated, "The should have been the minutes, but I them." The QAM functions of the H plans have been alguardians." The Q	AM indicated the HRC ove, and monitor all						

FORM CMS-2567(02-99) Previous Versions Obsolete

Event ID: CZDG11

Facility ID: 001159

If continuation sheet Page 7 of 7